state through 16 collaborating training institutions, to sensitise the health care personnel at different levels. Information, education and communication campaigns have generated universal awareness about the significant benefits from fewer children, better spacing, better health and nutrition, and better education.

The budget alloction outlays for the Ninth Five Year Plan period are Rs. 15120.00 crores for the Family Welfare programme, a major improvement upon the budget outlays for the Eighth Five Year Plan of Rs. 7018.68 cores.

As a result of all of the above, the achievements of the Family Welfare programme have been quite substantial. Some States like Kerala, Tamil Nadu and Goa have already achieved the goals set for 2000 AD and States like Andhra Pradesh, Karnataka, Gujarat, Maharashtra are close to achieving the goals. However, some States are lagging behind primarily on account of slow achievment of socio-economic indicators.

Crude Birth Rate has reduced from 40.8 in 1951 to 26.4 in 1998.IMR has reduced from 146 in 1951 to 72 in 1998. Couple Protection Rate has increased from 10.4.% in 1971 to 44% in 1999, Crude Death Rate has reduced from 25 in 1951 to 9.0 in 1998 and Total Fertility Rate has reduced from 6 in 1951 to 3.3 in 1997.

Controlling the Tuberculosis

†952. SHRI JHUMUK LAL BHENDIA: Will the Minister of HEALTH AND FAMILY be pleased to state:

(a) whether it is a fact that one person per minute is dying due to tuberculosis in India, stating the percentage or rate of success of the efforts to control it;

(b) what are the reasons that Government's claim that it have got control over this disease, are proving to be hollow; and

(c) the time to be taken further to tackle this disease and

†Original notice of the Question was received in Hindi.

whether any campaign is bring run to get control over T.B. by settin g any target; if so, the details thereof?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI N.T. SHANMUGAM): (a) to (c) India alone accounts for 25% of global TB burden and half million people are estimated to be dying every year.

The National TB Control Programme, which is in operation since 1962, was reviewed in 1992 and the findings of the Review Committee interalia were that the treatment completion rate if less than 40%, there were drug shortage, emphasis on X-ray for diagnosis, poor quality sputum microscopy, multiplicity of treatment regimens, inadequate budget and managerial capacity etc.

Based on these findings, Government of India evolved a Revised National TB Control Programme with the objective of curing at least 85% of sputum positive cases and detecting at least 70% of these cases. This World Bank assisted programme, which is in operation since 1993-94, is expected to cover 270 million population by 2000 following the Direct Observation Treatment Strategy (DOTS).

Under RNTCP, quality of diagnosis has been good and sputum conversion rate remains high at 87%. The programme is being expanded in a phased manner. It is expected that RNTCP will cover 400 million population by 2002.

Suggestion of DG, who on Tobacco Related Ailments

953. SHRI CM. IBRAHIM: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the Director-General, World Health Organisation (WHO) had, during her meeting with Prime Minister on January 8, 2000, indicated that every day 11,000 people die of tobacco-related ailments, and had suggested measures to being it down, without adversely affecting the interests of tobacco growers;

(b) if so, what measures were suggested; and

(c) the steps taken and being taken in the light thereof?